FORM 6 (ND/SD MISS. DEC. 2016)

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIPPI

Republ	ican National Commit	ttee Plaintiff			
V.			CIVIL ACTION NO.	1:24-cv-25-LG-RPM	
Justin V	Wetzel, et al.	Defendant			
	APPLI	CATION FOR ADMISSION	PRO HAC VICI	E	
(A)	Name:	Neil A. Steiner			
	Firm Name:	Dechert LLP			
Office Address:		3 Bryant Park, 1095 Ave. of the Americas			
	City:	New York	State	10036	
	Telephone:	212-698-3500	Fax:	-3599	
	E-Mail:	neil.steiner@dechert.com			
(B)	Client(s):	Disability Rights Mississippi	i		
	Address:	5 Old River Place, Suite 101			
	City:	Jackson	State MS	Zip	
	Telephone:	601-968-0600			

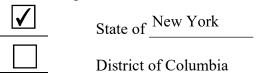
The following information is optional:

FORM 6 (ND/SD MISS. DEC. 2016)

Have you had a prior or continuing representation in other matters of one or more of the
clients you propose to represent, and is there a relationship between those other matter(s) and
the proceeding for which you seek admission?

Do you have any special experience, expertise, or other factor that you believe makes it particularly desirable that you be permitted to represent the client(s) you propose to represent in this case?

(C) I am admitted to practice in the:



and I am currently in good standing with that Court. A certificate to that effect, issued by the appropriate licensing authority within ninety days of the date of this Application, is enclosed; the physical address, telephone number and website/email address for that admitting Court are:

New York Supreme Court Appellate Division - First Judicial Department 27 Madison Avenue New York, NY 10010 (212) 340-0400 https://www.nycourts.gov/courts/AD1/index.shtml

All other courts before which I have been admitted to practice:

FORM 6 (ND/SD MISS. DEC. 2016)

Southern District of New York Eastern District of New York Northern District of New York 11/01/20 Eastern District of Michigan Eastern District of Wisconsin O2/14/20 Second Circuit COA Fifth Circuit COA Sixth Circuit COA Seventh Circuit COA 06/18/20 Seventh Circuit COA 06/2014		Period of A	Admission		
		12/1998 11/01/2000 09/08/2003 02/14/2012 01/12/2007 01/20/2021 06/18/2007 06/2014 03/21/2013	03 12 07 21		
(D)	Have you been denied admission pro hac vice in this state?		Yes	No •	
	Have you had admission pro hac vice revoked in this state?	•	0	ledo	
	Has Applicant been formally disciplined or sanctioned by a in this state in the last five years?	iny court	\bigcirc	•	
name and f	e answer was "yes," describe, as to each such proceeding, the e of the person or authority bringing such proceedings; the date finally concluded; the style of the proceedings; and the finding ection with those proceedings:	tes the proce	edings v	vere initiated	
(E)	Has any formal, written disciplinary proceeding ever been brought against you by a disciplinary authority in any other jurisdiction within the last five years?		Yes	No •	

If the answer was "yes," describe, as to each such proceeding, the nature of the allegations; the name of the person or authority bringing such proceedings; the date the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings.

			Ye	es No
(F)	Have you been formally held i sanctioned by any court in a w for disobeying its rules or order	ritten order in the last fi		•
	If the answer was "yes," descr the name of the court before w contempt order or sanction, the court's rulings (a copy of the w attached to the application).	hich such proceedings we caption of the proceedi	vere conducted; the ngs, and the substar	date of the nces of the
(G)	Please identify each proceed pro hac vice in this state with	-		o proceed
Nam	e and Address of Court	Date of Application	Outcome of A	pplication

FORM 6	(ND/SD Miss.	DEC. 2016)

(H) Please identify each case in which you have appeared as counsel pro hac vice in this state within the immediately preceding twelve months, are presently appearing as counsel pro hac vice, or have pending applications for admission to appear pro hac vice, as follows:

Name and Address of Court

Style of Case

(I)	Have you read and become familiar with all the LOCAL	res	NO
(1)	Uniform Civil Rules of the United States District Courts for the Northern and Southern Districts of Mississippi?	•	0
	Have you read and become familiar with the MISSISSIPPI RULES OF PROFESSIONAL CONDUCT?	•	0

(J) Please provide the following information about the resident attorney who has been associated for this case:

Name and Bar Number Joshua Tom, MS Bar#105392

Firm Name: American Civil Liberties Union of Mississippi

Office Address: P.O. Box 2242

City: Jackson State: MS Zip: 39225

Telephone: 601.354.3408 Fax: 601.355.6465

Email address: jtom@aclu-ms.org

Case 1:24-cv-00025-LG-RPM Document 76 Filed 04/09/24 Page 6 of 6

FORM 6 (ND/SD MISS. DEC. 2016)

(K)	The undersigned resident attorney certifies that he/she agrees to the association with
	Applicant in this matter and to the appearance as attorney of record with Applicant.

Resident Attorney

I certify that the information provided in this Application is true and correct.

2/20/2024 Date

Applicant's Handwritten Signature

Unless exempted by Local Rule 83.1(d)(5), the application fee established by this Court must be enclosed with this Application.

CERTIFICATE OF SERVICE

The undersigned Resident Attorney certifies that a copy of this Application for Admission

Pro Hac Vice has been mailed or otherwise served on this date on all parties who have appeared in this case.

9th April 24
This the _____ day of _____, 20__.

Resident Attorney